### COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

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As a below named inventor, I hereby declare that:

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#### COMBINATION METHODS OF TREATING CANCER

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Number	(if PCT, so indicate)	(dd/mm/yy)	Yes	No

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I hereby appoint MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO P.C., Customer Number: 35437, as Applicant's attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, with full power of substitution and revocation to take any and all action necessary with regard to the above-identified patent.

Please address all telephone calls and correspondence to:

Ivor R. Elrifi
MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO P.C.
666 Third Avenue – 24<sup>th</sup> Floor
New York, NY 10017
Telephone: (212) 935-3000

Nanegue	Nov 1 2006
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Telephone: (212) 935-3000

Wovember 13, 2006

Date

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or patent issued thereon.

Inventor's Signature: Full Name of Inventor: Nicholas G. Bacopoulos Citizenship: United States of America	Date
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Post Office Address: same as above	
Inventor's Signature:	Date
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Citizenship: United States of America	
Residence: 110 Cedar Green Lane	
Berkeley Heights, New Jersey 07922	

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Telephone: (212) 935-3000 Telefax: (212) 983-3115 Customer Number: 35437

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